

Bill Finch
Mayor

City of Bridgeport, Connecticut
INLAND WETLANDS AND WATERCOURSES AGENCY

ROOM 206 - 45 LYON TERRACE
BRIDGEPORT, CONNECTICUT 06604
TELEPHONE: (203) 576-7222

**City of Bridgeport
Inland Wetlands and Watercourses Agency
Application
Submission Requirements**

The following information must be submitted when filing an application for an inlands and watercourses permit:

1. 15 copies of detailed plans, including the "limits of disturbance"
2. 15 copies of the completed application form signed by the owner of record
3. Applicable fee
4. 1 copy of completed State Reporting Form
5. Start Card (The Start Card must be submitted only after issuance of the wetlands permit and before any work is started)
6. Finished Card (The Finished Card shall be submitted following completion of all approved work)

Please contact William E. Minor at 576-7222 with questions.

Inland Wetlands and Watercourses Agency

City of Bridgeport, 45 Lyon Terrace, Room 206, Bridgeport, Connecticut 06604

Telephone: (203) 576-7222

APPLICATION FOR A PERMIT TO CONDUCT REGULATED ACTIVITIES

1. Project Information

- a. Name of Applicant: _____ Date: _____
Applicant's Interest in Property: Owner: _____ Lessee: _____ Agent: _____ Other: _____

Business Address: _____

Phone Number: _____ Fax. Number: _____

- b. Name of Property Owner (If Not Applicant): _____

Business Address: _____

Phone Number: _____ Fax. Number: _____

2. Existing Conditions

- a. Project Title: _____ Total Site Acreage: _____

Project Address: _____

Project Map No.: _____ Lot No.: _____ Present Use of Property: _____

- b. Total Onsite Wetland Acreage: _____ Total Onsite Watercourse Length: _____

3. Proposed Conditions

- a. The Proposed Activity Will Affect (Please check where appropriate):
Wetland: _____ Watercourse/Open Water: _____ Setback: _____ Other: _____

- b. Wetland Acreage Affected: _____ Watercourse Length Affected: _____

- c. Description of the project in relationship to regulated areas for which authorization is requested (include closest distance proposed activity is from regulated areas):

4. **Notice Requirements**

- a. Name and addresses of property owners requiring notification of this application as per the Inland Wetlands and Watercourses Regulations, Section 7.4.k. Attach additional sheets if needed. Properties located within 500 feet of an adjoining municipality require written notification by the applicant to the adjacent municipal inland wetlands agency by Certified Mail - Return Receipt Requested - on the same day of filing this application in accordance with Section 8.7. Documentation of such notice shall be provided to this Agency.

Name: Address: Map No.: Lot No.:

- b. Is the project located within 500' of another municipality?: Yes: _____ No: _____

If answered "Yes" above, has the municipality(ies) been notified as required by the Agency's regulations?: Yes: _____ No: _____ N/A: _____

5. **General Conditions**

The undersigned applicant understands that this application is to be considered complete when all information and documents required by the Agency have been submitted. The Agency may request additional information to properly evaluate the proposed activities pursuant to the regulations. The undersigned warrants the truth of all statements contained herein and in all supporting document according to the best of his/her knowledge. The applicant further understands that any violation of any provision of a permit may result in orders to cease and desist from any and all work at the site. The undersigned applicant hereby consents to necessary and proper inspections of the subject property by authorized agents of the Agency.

Signature of Applicant: Printed Name / Title: Date:

Signature of Owner: Printed Name: Date:

=====

Application Checklist
(For Agency Use Only)

Application Number: Fee Paid:
List of Property Owners (1): Plans/Applications (12):
Agent Authorization Letter (1): CT DEP State Reporting Form (1):

b3/apform. wpd (3/2002)

Land Use Permit Fee Schedule

Inland Wetlands and Watercourses Agency

Applications/Petitions	Base Fee	Application Fee	Technology Fee Per Application	State Fee
New One-Family Home	\$250	\$300	\$10	\$30
New Multi-Family Residential Buildings	\$250	\$150 per dwelling unit; \$7500 Maximum	\$10	\$30
New Non-Residential Buildings	\$250	\$150 per 1,000 sf (gross) of building area; \$7500 Maximum	\$10	\$30
Subdivisions	\$250	\$200 per lot	\$10	\$30
Other Site Activities on Properties of one acre size or larger	\$250	\$250 per acre on site wetlands (or portions thereof); \$2000 Maximum	\$10	\$30
Permit Modifications	\$250	Equal to total application fee	\$10	\$30
Permit Transfer	--	\$150	\$10	--
Permit Renewal	--	\$250	\$10	--
Public Hearing	--	\$500	\$10	--
Permit Compliance Inspection:				
First visit/inspection	--	\$200	\$10	--
Additional visits/inspections	--	Increase of \$100 per subsequent visit/inspection	\$10	--
Violations <i>(Includes notice, site inspection, report)</i>	\$250	\$500	\$10	--
Additional Compliance Inspection	--	\$200 per visit	\$10	--

-- = Not Applicable

**City of Bridgeport
Inland Wetlands and Watercourses Agency**

**Start Card and Finish Card Form
(Form D)**

Use the first page of this form to notify the Chairman or Chairwoman of the Agency that you want to start your permitted activity. You must plan to set aside two City working days between the time your erosion controls are in, and when you want to start you project. (This is not any longer than the set aside time for "Call Before You Dig". Let "Call Before You Dig" be your reminder to notify us with your start card.) Cut out the start card below, and deliver when ready.

Start Card

Applicant _____

Permit No. _____ For _____

At _____

The **Start** date of the above regulated activity, for which I have been granted by the City of Bridgeport Inland Wetlands and Watercourses Agency is _____

Signature _____

Phone _____

Date _____

**City of Bridgeport
Inland Wetlands and Watercourses Agency**

**Start Card and Finish Card Form
(Form D)**

Use the second page of this form to notify the Chairman or Chairwoman of the Agency when your project is complete, and you want to remove your erosion controls. You may not remove your erosion controls without the approval of the Agency or its designated agent. Cut out the finish card below, and deliver to Chairman or Chairwoman of the Agency.

Finish Card

Applicant _____

Permit No. _____ **For** _____

At _____

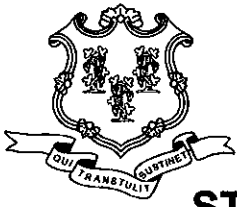
The **Completion** date of the above regulated activity, for which I have been granted by the City of Bridgeport Inland Wetlands and Watercourses Agency is

_____.

Signature _____

Phone _____

Date _____



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION



**STATEWIDE INLAND WETLANDS & WATERCOURSES
ACTIVITY REPORTING FORM**

Pursuant to section 22a-39(m) of the General Statutes of Connecticut and section 22a-39-14 of the Regulations of Connecticut State Agencies, inland wetlands agencies must complete the Statewide Inland Wetlands & Watercourses Activity Reporting Form for each action taken by such agency.

This form may be made part of a municipality's inland wetlands application package. If the municipality chooses to do this, it is recommended that a copy of the Town and Quadrangle Index of Connecticut and a copy of the municipality's subregional drainage basin map be included in the package as well.

Please remember, the inland wetlands agency is responsible for ensuring that the information provided is accurate and that it reflects the final action of the agency. Incomplete or incomprehensible forms will be mailed back to the agency. Instructions for completing the form are located on the following page.

The inland wetlands agency shall mail completed forms for actions taken during a calendar month no later than the 15th day of the following month to the Department of Environmental Protection (DEP). Do not mail this cover page or the instruction page. **Please detach and mail only the completed yellow reporting form to:**

Wetlands Management Section
Inland Water Resources Division
Department of Environmental Protection
79 Elm Street
Hartford, CT 06106

Questions may be directed to the DEP's Wetlands Management Section at (860) 424-3019.

INSTRUCTIONS FOR COMPLETING THE STATEWIDE INLAND WETLANDS & WATERCOURSES ACTIVITY REPORTING FORM

Use a separate form to report each action taken by the Agency. Complete the form as described below.

PART I: To Be Completed By The Inland Wetlands Agency Only

1. Enter the year and month the Inland Wetlands Agency took the action being reported.
2. Circle ONE code letter to describe the final action or decision taken by the Inland Wetlands Agency. *Do not submit a reporting form for withdrawn applications.* Do not enter multiple code letters (for example: if an enforcement notice was given and subsequent permit issued - two forms for the two separate actions are to be completed).
 - A = A Permit Granted by the Inland Wetlands Agency (*not including map amendments, see code D below*)
 - B = Any Permit Denied by the Inland Wetlands Agency
 - C = A Permit Renewed or Amended by the Inland Wetlands Agency
 - D = A Map Amendment to the Official Town Wetlands Map - or -
An Approved/Permitted Wetland or Watercourse Boundary Amendment to a Project Site Map
 - E = An Enforcement Notice of Violation, Order, Court Injunction, or Court Fines
 - F = A Jurisdictional Ruling by the Inland Wetlands Agency (i.e.: activities "permitted as of right" or activities considered non-regulated)
 - G = An Agent Approval pursuant to CGS 22a-42a(c)(2)
 - H = An Appeal of Agent Approval Pursuant to 22a-42a(c)(2)
3. Check "Yes" if a public hearing was held in regards to the action taken; otherwise check "No".
4. Enter the name of the Inland Wetlands Agency official verifying that the information provided on this form is accurate and that it reflects the FINAL action of the agency.

PART II: To Be Completed By The Inland Wetlands Agency Or The Applicant - If Part II is completed by the applicant, the applicant must return the form to the Inland Wetlands Agency. The Inland Wetlands Agency must ensure that the information provided is accurate and that it reflects the FINAL action of the Agency.

5. Enter the name of the municipality for which the Inland Wetlands Agency has jurisdiction and in which the action/project/activity is occurring.

Check "Yes" if the action/project/activity crosses municipal boundaries and enter the name(s) of the other municipality(ies) where indicated. Check "No" if it does not cross municipal boundaries.
6. Enter the USGS Quad Map name and number (1 through 115) as found on the Connecticut Town and Quadrangle Index Map (the directory to all USGS Quad Maps) that contains the location of the action/project/activity. See reverse side of the reporting form for the Connecticut Town and Quadrangle Index Map.

ALSO enter the four-digit identification number of the corresponding Subregional Drainage Basin in which the action/project/activity is located. If the action/project/activity is located in more than one subregional drainage basin, enter the number of the basin in which the majority of the action/project/activity is located. A town subregional drainage basin map has been mailed to all Municipal Inland Wetlands Agencies. Further, a table to subregional drainage basin names and numbers is provided at:
http://ct.gov/dep/cwp/view.asp?a=2698&q=323038&depNav_GID=1707.
7. Enter the name of the individual applying for, petitioning, or receiving the action.
8. Enter the name and address or location of the action/project/activity site. Also provide a brief description of the action/project/activity. Include in the description if the action/project/activity is TEMPORARY or PERMANENT in nature.



CONNECTICUT DEPARTMENT OF
ENVIRONMENTAL PROTECTION
79 Elm Street
Hartford, CT 06106-5127

Gina McCarthy, Commissioner

GIS CODE #: _____
For DEP Use Only

Statewide Inland Wetlands & Watercourses Activity Reporting Form

Please complete and mail this form in accordance with the instructions. Please print or type.

PART I: To Be Completed By The Inland Wetlands Agency Only

1. DATE ACTION WAS TAKEN: Year _____ Month _____
2. ACTION TAKEN (circle one): A B C D E F G H
3. WAS A PUBLIC HEARING HELD? Yes _____ No _____
4. NAME OF AGENCY OFFICIAL VERIFYING AND COMPLETING THIS FORM:
(print) _____ (signature) _____

PART II: To Be Completed By The Inland Wetlands Agency Or The Applicant

5. TOWN IN WHICH THE ACTION IS OCCURRING: _____
Does this project cross municipal boundaries? Yes _____ No _____
If Yes, list the other town(s) in which the action is occurring: _____
6. LOCATION: USGS Quad Map Name: _____ AND Quad Number: _____
Subregional Drainage Basin Number: _____
7. NAME OF APPLICANT, VIOLATOR OR PETITIONER: _____
8. NAME & ADDRESS/LOCATION OF PROJECT SITE: _____
Briefly describe the action/project/activity: _____
9. ACTIVITY PURPOSE CODE: _____
10. ACTIVITY TYPE CODE(S): _____, _____, _____, _____
11. WETLAND / WATERCOURSE AREA ALTERED [must be provided in acres or linear feet as indicated]:
Wetlands: _____ acres Open Water Body: _____ acres Stream: _____ linear feet
12. UPLAND AREA ALTERED [must be provided in acres as indicated]: _____ acres
13. AREA OF WETLANDS AND / OR WATERCOURSES RESTORED, ENHANCED OR CREATED: _____ acres
[must be provided in acres as indicated]

DATE RECEIVED: _____

PART III: To Be Completed By The DEP

DATE RETURNED TO DEP: _____

FORM COMPLETED: YES NO

FORM CORRECTED / COMPLETED: YES NO